



# REGISTRATION FORM COMMUNITY CONNECTIONS EXPO

NAME OF ORGANIZATION/CLUB: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

EMAIL: \_\_\_\_\_

PHONE #: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_

CONTACT PHONE #: \_\_\_\_\_

ARE YOU A 501 C: \_\_\_\_\_

WHAT WILL YOU BE FUNDRAISING AT YOUR BOOTH? \_\_\_\_\_  
\_\_\_\_\_

Please return form to our office at:

10 Main St., Williston, ND 58801

or June@willistonchamber.com

(701) 577-6000 / [www.willistonchamber.com](http://www.willistonchamber.com)

**WILLISTON AREA**  
**CHAMBER OF COMMERCE**  
CONNECT ★ ENGAGE ★ GROW ★ LEAD